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** IF REQUIRED, FOREIGN FILING Foreign Priority claimed Yes \(\text{No} \) No 35 USC 119(a-d) conditions met \(\text{Yes} \) No Verified and \(\text{/MARIE D} \) PATTERSON/ Acknowledged Examiner's Signature			Met after Allowance		STATE OR COUNTRY AUSTRALIA	SHEE DRAWI	ETS	TOT. CLAII	MS	INDEPENDENT CLAIMS 2
ADDRESS NIXON F 401 9TH SUITE 9	PEABOD STREE 00 GTON,	DY, LLP T, NW DC 20004-2	128							
TITLE										
Orthotic insert and method of manufacture thereof										
FILING FEE RECEIVED 605	FEES: Authority has been given in Paper No to charge/credit DEPOSIT ACCOUNT No for following:						□ All Fees □ 1.16 Fees (Filing) □ 1.17 Fees (Processing Ext. of time) □ 1.18 Fees (Issue) □ Other □ Credit			